



Montana Medicaid

CLAIM JUMPER

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In This Issue

Sports Physicals	1
Publications Reminder	1
CHIP Community Partners	1
Spring Provider Fair	1
WINASAP Upgrade Required for NDC Data Collection	1
Radiopharmaceutical Pricing 2007 Update	2
WINASAP 5.13 Improvements	2
Expansion of Provider Types for the Mental Health Services Plan	2
CHIP Extended Dental Plan	2
Recent Publications	3

Sports Physicals

A sports physical is typically a non-problem-oriented encounter in which you evaluate and certify a patient's involvement in organized sports, such as high school football. If you perform a comprehensive history and physical examination, report the age-appropriate code from the preventive medicine series. If you perform less than a comprehensive history and exam, report the appropriate level office or other outpatient E&M visit code. Typically, you'd use diagnosis code V70.3 (general medical examination; other medical examination for administrative purposes), which includes general medical exams for sports competition, for a sports physical.

Codes 97005 (athletic training evaluation) and 97006 (athletic training re-evaluation) should NOT be used for sports physicals. From a CPT per-

spective, athletic training codes are generally problem-oriented, and they include recognition and evaluation of an athletic injury; management and recommendations for treatment; and educational training related to the specific injury.

Montana Medicaid will now cover codes 97005 and 97006 only as listed above.

Submitted by Pat Osterhout, DPHHS

Publications Reminder

It is providers' responsibility to be familiar with Medicaid manuals, fee schedules, and notices for their provider type, as well as other information published in the *Claim Jumper* and on the Medicaid website (mtmedicaid.org).

CHIP Community Partners

The Children's Health Insurance Plan (CHIP) partners with health care providers, dentists, mental health professionals, and other community-based organizations all across Montana to help eligible families obtain health insurance for their children.

CHIP is a free or low-cost health insurance plan available to families who do not qualify for Medicaid, but cannot afford private insurance. CHIP covers medical, dental, eyeglasses, and many other health care services.

You can help families get the coverage they need by making CHIP brochures and applications available to uninsured families in your community. CHIP supplies all materials. Encourage parents to visit the CHIP website at www.chip.

mt.gov. Parents can fill out an application right on their computer!

Please help us get more uninsured Montana children enrolled in CHIP. There has never been a better time for families to apply since there is no waiting list.

If you would like to receive a CHIP kit (brochures, applications, and brochure holder), please call or e-mail Michael Mahoney, CHIP Community Relations Manager, at 877-543-7669 (toll-free) or mmahoney2@mt.gov.

CHIP is health insurance for kids and peace of mind for parents. Thank you for your support of CHIP!

Submitted by Michael Mahoney, DPHHS

Spring Provider Fair

Watch future issues of the *Claim Jumper* and www.mtmedicaid.org for information on the provider fair, to be held in April or May in Helena.

WINASAP Upgrade Required for NDC Data Collection

Effective January 1, 2008, Montana Medicaid requires all claims submitted for physician-administered drugs to include the National Drug Code (NDC), the corresponding HCPCS code, and the units administered for each code.

WINASAP users must upgrade to and begin using WINASAP version 5.13 immediately. The program is available at www.mtmedicaid.org by selecting "Electronic Billing" in the left menu. Providers must upgrade to avoid problems with the NDC drug units.

The Department collects drug rebates based on the NDC code and units administered. Use of an incorrect NDC

or inaccurate reporting of a drug quantity will cause the Department to report false data to drug manufacturers billed for drug rebates and will delay reimbursement to the provider.

For more information on NDCs, please see the November 30, 2007, provider notice .

Submitted by Pat Osterhout, DPHHS

Radiopharmaceutical Pricing 2007 Update

Medicaid has updated pricing for radiopharmaceutical drugs.

Radiopharmaceutical drugs are priced according to the Redbook price and the fee schedule is updated as new prices become available. When there is no Redbook price available, the drug will need to be priced manually.

The following codes *do not* have a Redbook price. To ensure reimbursement at the correct price they will need to be manually priced. All others will be paid according to the fee schedule determined by the Redbook pricing. The new prices took effect October 1, 2007, and will be posted in the January 2008 fee schedule.

A9517	I-131 sodium iodide capsule (therapeutic)
A9526	Ammonia N-13
A9528	I-131 sodium iodide capsule diagnostic per mci
A9529	I-131 sodium iodide solution diagnostic per mci
A9530	I-131 sodium iodide solution therapeutic per mci
A9531	I-131 sodium iodide diagnostic per mci
A9532	Iodinated I-125 serum albumin 5 uci (Jeanatope)
A9546	Cobalt Co-57/58, Cyanocobalamin
A9552	Fluorodexy glucose (FDG, F-18 NAF, Fluorine-18)
A9567	Tc-99-m Pentetate, diagnostic, aerosol

Please submit a 1500 form, with a copy of the invoice attached, directly to the Department of Health and Human Services for pricing:

DPHHS Health Resources Division
Attn: Physician-Related Services
P.O. Box 202951

Helena, MT 59620-2951

Submitted by Pat Osterhout, DPHHS

WINASAP 5.13 Improvements

A new version of WINASAP2003, release v.5.13, is now available at www.acs-gcro.com. With this version, the Error Text reference screen has been put back in. A provider claim update utility to update claim data with the correct provider information has been added to correct the blank NM1, N3 and N4 issue. Debug logging has been added to help with the issues that can't consistently be recreated. The change to the setting of the NET directory at run time has been backed out. In addition, users can no longer "change" billed, accepted or submitted claims. These claims must now be "copied" into a keyed claim.

Expansion of Provider Types for the Mental Health Services Plan

Beginning February 1, 2008, the Addictive and Mental Disorders Division will implement an expansion of the Mental Health Services Plan. The additional provider types will be able to bill on a fee-for-service basis for diagnostic and medication management services, including labs, for the treatment of symptoms of mental illness. These services may be provided to adults enrolled in the Mental Health Services Plan.

These provider types are:

- Federally Qualified Health Clinics (provider type 56)
- Rural Health Clinics (provider type 55)
- Psychiatrists (provider type 65)
- Physicians (provider type 27)
- Mid-Level Practitioners (provider type 44)
- Lab and X-Ray (provider type 40)

The Mental Health Services Plan covers outpatient mental health treatment and medication for adults with Severe Disabling Mental Illness, as defined

in ARM 37.89.103. Eligibility determinations are currently made by the Community Mental Health Centers.

Providers must have a signed Mental Health Services Plan Addendum on file with their Montana's Healthcare Programs enrollment. The addendum can be found at www.mtmedicaid.org. Providers can also call Provider Relations at (800) 624-3958 to confirm an addendum is in place.

For a list of the codes that may be billed, please contact the Mental Health Services Bureau at 406-444-3964 or e-mail dsanchez@mt.gov.

Submitted by Deb Sanchez, DPHHS

CHIP Extended Dental Plan

The Extended Dental Benefits Program (EDP) offered under the Children's Health Insurance Plan (CHIP) was extremely successful. All funds for this benefit year (Oct 1-Sept 30) are now committed and 671 CHIP children with significant dental needs have or will receive additional dental care beyond the CHIP basic dental benefit. CHIP is no longer accepting any new "Requests for Extended Dental Benefits" since all funds are committed.

CHIP's basic dental plan remains in effect for each CHIP covered child. That plan is limited to \$412 in billed charges per benefit year (Oct 1 – Sept 30). Providers should verify a child's CHIP eligibility prior to providing services.

CHIP will notify providers when CHIP Extended Dental Program funds are available again. All CHIP families are also being informed EDP funds are exhausted.

Submitted by Barbara Arnold, CHIP Dental and Eyeglasses Manager.

14,250 copies of this newsletter were printed at an estimated cost of \$.36 per copy, for a total cost of \$5,174.93, which includes \$2,197 for printing and \$2,977.93 for distribution.

Alternative accessible formats are available by calling the DPHHS Office of Planning, Coordination and Analysis at (406) 444-9772.

Recent Publications

The following are brief summaries of recently published Medicaid information and updates. For details and further instructions, download the complete document from www.mtmedicaid.org, the Provider Information website. Select **Resources by Provider Type** for a list of resources specific to your provider type. If you cannot access the information, contact Provider Relations at (800) 624-3958 or (406) 442-1837 in Helena or out-of-state.

Recent Publications Available on Website		
Date	Provider Type	Description
Notices and Replacement Pages		
11/30/07	Physician, Mid-Level Practitioners, Psychiatrists, Public Health Clinics, Outpatient Hospitals, Birthing Centers	NDC Requirement on All Physician-Administered Drugs
12/03/07	Ambulance, ASC, Audiologist, Chemical Dependency, Chiropractor (QMB), Clinic (Public Health), Dialysis (Home), DME, EPSDT, Eyeglasses, Hearing Aid, Home and Community Based Services, IDTFs, Lab and Imaging, Licensed Professional Counselor, Mental Health Center, Mid-Level Practitioner, Nutritionist, Occupational Therapist, Optician, Optometric, Oral Surgeon, Personal Assistance, Physical Therapist, Physician, Podiatrist, Private Duty Nursing, Psychiatrist, Psychologist, School-Based Services, Social Worker, Speech Therapist, Targeted Case Management (Mental Health), Targeted Case Management (Non-Mental Health), Therapeutic Foster Care, Therapeutic Group Home, Transportation: Personal Transportation and Per Diem, Transportation: Commercial and Specialized Non-Emergency	NPI Requirement for Fee-for-Service Healthcare Provider Claims
12/03/07	Clinic (Freestanding Dialysis), FQHC, Home Health, Hospice, Inpatient Hospital, Outpatient Hospital, Indian Health Services, Residential Treatment Center, RHC	NPI Requirement for Institutional Healthcare Provider Claims
12/03/07	Physician, Mid-Level Practitioners, Psychiatrists, Public Health Clinics, Outpatient Hospitals, Birthing Centers, Podiatrists, IDTFs, Freestanding Dialysis Clinics, ASCs	NDC Requirement on All Physician-Administered Drugs (revised)
12/04/07	Physician, Mid-Level Practitioners, Pharmacies	Carisoprodol (Soma®) Containing Products to Require Prior Authorization
12/04/07	Pharmacy, Dental, Denturist, Home Infusion Therapy	NPI Requirement for Fee-for-Service Healthcare Provider Claims
12/04/07	Swing Bed, Nursing Facility	NPI Requirement for Institutional Healthcare Provider Claims
12/06/07	Dentist, Denturist, Dental Hygienist	Dental Rates and Claim Forms
12/11/07	Physician	Sports Physicals
12/11/07	Hospital Inpatient	Alcohol/Drug Detox Medicaid Monies Recovery
12/17/07	All Provider Types	Enhanced Claims Editing—Assistant / Team / Co-Surgeon
12/17/07	All Provider Types	Enhanced Claims Editing—Multiple Evaluation and Management Services Provided on the Same Day
12/18/07	Physicians, Mid-Level Practitioners, IDTFs, Psychiatrists, Podiatrists	Radiopharmaceutical Pricing 2007 Update
12/21/07	Physicians, Mid-Level Practitioners, Pharmacies	Compound Prescription Billing Changes
12/26/07	Physicians, Mid-Level Practitioners, Psychiatrists, Public Health Clinics, Outpatient Hospitals, Birthing Facilities, Podiatrists, Independent Diagnostic Testing Facilities, Freestanding Dialysis Clinics, Ambulatory Surgical Centers	WINASAP Upgrade Required for NDC Data Collection
12/27/07	RHCs, FQHCs	2008 Rate Increase
12/28/07	Physicians, Mid-Level Practitioners, RHCs, FQHCs, Public Health Clinics, Outpatient Hospitals	New Codes for Smoking and Tobacco Use Cessation Counseling
Other Resources		
12/03/07, 12/10/07, 12/17/07, 12/26/07	All Provider Types	What's New on the Site This Week
12/12/07	All Provider Types	January <i>Claim Jumper</i>
12/19/07	All Provider Types	Revised Individual Adjustment Form added to Forms page
12/19/07	Passport	Provider Agreement Attachment D
12/20/07, 12/27/07	All Provider Types	Revised news item regarding Provider Reenrollment for NPI

Montana Medicaid
ACS
P.O. Box 8000
Helena, MT 59604

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Key Contacts

Provider Information website: <http://www.mtmedicaid.org>

ACS EDI Gateway website: <http://www.acs-gcro.com>

ACS EDI Help Desk (800) 624-3958

Provider Relations

(800) 624-3958 (In and out-of-state)

(406) 442-1837 (Helena)

(406) 442-4402 Fax

Email: MTPRHelpdesk@ACS-inc.com

TPL (800) 624-3958 (In and out-of-state)

(406) 443-1365 (Helena)

(406) 442-0357 Fax

Direct Deposit Arrangements (406) 444-5283

Verify Client Eligibility

FAXBACK (800) 714-0075

Automated Voice Response (AVR) (800) 714-0060

Point-of-Sale Help Desk for Pharmacy Claims (800) 365-4944

PASSPORT (800) 362-8312

Prior Authorization

Mountain-Pacific Quality Health Foundation (800) 262-1545

Mountain-Pacific Quality Health Foundation—DMEPOS/Medical

(406) 457-5887 local, (877) 443-4021, ext. 5887 long-distance

First Health (800) 770-3084

Transportation (800) 292-7114

Prescriptions (800) 395-7961

Provider Relations
P.O. Box 4936
Helena, MT 59604

Claims Processing
P.O. Box 8000
Helena, MT 59604

Third Party Liability
P.O. Box 5838
Helena, MT 59604